

CLAIMS ONLY

Application Number

101660297

Filing Date

Applicant(s)

9/15/05

* May be used for additional claims or amendments

| CLAIMS | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | AFTER THIRD AMENDMENT | | AFTER FOURTH AMENDMENT | | AFTER FIFTH AMENDMENT | |
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| | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total Depend | 20 | | | | | | | | | |
| Total Claims | 24 | | | | | | | | | |
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| Total Indep. | | | | | | | | | | |
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Best Available Copy